CERTIFICATION OF COMPLIANCE

Company Name	to the best of its knowledge
and belief does hereby certify that the accompanyi	ng form(s) as identified by the listing attached
hereto, does (do) comply with all sections of the N	ew Hampshire Insurance Code and Parts
applicable to such insurance policies and related	forms, and will be so construed, and agrees
that when any provision in a policy subject to Title	XXXVII or any insurance part is in conflict
with said title or part, said provision will be stricked	en and that the rights, duties, and obligations of
the insurer, the insured and the beneficiary shall be	governed by the applicable statutes and parts,
and does further certify that:	
1.771 6 () 1 (1)	
1. The form(s) does(do) not contain any inconsiste	nt, ambiguous or misleading clauses:
2. The form(s) does(do) not contain specifications	or conditions that unreasonably or deceptively
affect the risk purposed to be assumed in the gener	, i
certificate:	71 7
3. The only variations from the usual provisions of	± •
kind or other documents attachable to a basic contr	act are clearly marked or otherwise indicated
on page(s) of the attached form(s):	
4. The attached form(s) is(are) in final printed form	nat and is(are) exactly as will be offered for
sale:	int und is(are) enactly as will be offered for
5. The attached form(s) does(do) not contain any provision, clause or concept previously	
disapproved by the New Hampshire Insurance Dep	partment.
Dated	
Dated	
Name of Company	
	by:
	(Title of person signing)